
HEALTH & HEALTH CARE IN ALASKA 2014

60 YEARS AFTER THE PARRAN REPORT

PROJECT/REPORT PURPOSE

This report will provide a picture of population health status and health care delivery and financing in Alaska today — in the historical context of how health conditions and health care systems have evolved in the 60 years since the Parran Report¹ was published, and the 30 years since the last statewide health plan was produced by Alaska's Health Systems Agencies². It will document and celebrate achievements in improving the health of, and increasing access to quality health care for, Alaskans over more than half a century; and also offer some perspectives on future challenges.

The report will be produced under the auspices of the Alaska Health Care Commission. The intent is to provide an informational and educational resource to help health professionals, policy makers, the media, and the interested public better understand health and health care in Alaska.

STATE HEALTH OFFICIAL EXPERT ADVISORY PANEL

Current and former State Health Officials (SHOs) currently working in Alaska's health system:

- **Ward Hurlburt, MD, MPH**, Chief Medical Officer, Alaska Department of Health & Social Services (*Alaska SHO: 2009 – current*)
- **Jay Butler, MD, MPH**, Senior Director, Division of Community Health Services, Alaska Native Tribal Health Consortium (*Alaska SHO: 2006 – 2009*)
- **Richard Mandsager, MD**, Chief Executive, Providence Alaska Medical Center (*Alaska SHO: 2004 – 2006*)

¹ The Parran Report was the report of a team from the University of Pittsburgh's School of Public Health who, under contract with the U.S. Department of the Interior, conducted a two-year study of population health status and health care services in Alaska between 1953 and 1954. The study was led by former U.S. Surgeon General Dr. Thomas Parran, and their final report to the federal government — titled "Alaska's Health: A Survey Report" — was published in 1954. Thereafter known as "The Parran Report" in Alaska's health circles, the study was seminal in bringing national attention to the deplorable health conditions of Alaska Natives, and resulted in significant improvement in health conditions and health care systems in the state.

² The National Health Planning and Resources Development Act of 1974 (P.L. 93-641) created an extensive system of community health planning agencies across the country, mandating the establishment of regional Health Systems Agencies (HSAs) in every state. The primary intent of the law was to provide local direction and control of health care planning to provide information and guidance for the significant government investment in health infrastructure development that was happening during that period. Before their dissolution in the mid-1980s, Alaska's HSAs published the last "State Health Plan for Alaska" in 1984.

REPORT OUTLINE

- I. Preface
- II. Acknowledgements
- III. Table of Contents
- IV. “Report Card” — Comparison of Key Health Indicators 1950-1980-2010
- V. Executive Summary
- VI. **Part I: Introduction**
- VII. **Part II: Health Status in Alaska**
- VIII. **Part III: Health Care in Alaska**
- IX. **Part IV: Commentary by State Health Official Advisory Panel**
 - Where we’ve been
 - How far we’ve come — Where we are today
 - Where we’re headed — Unfinished business — Implications for the future
- X. Bibliography –Referenced Statewide Reports on Health Status and Health Care in Alaska
 - a. Parran Report — 1954
 - b. State Health Plan for Alaska —1984
 - c. Alaska Health Status Assessment — June 2014 [*Healthy Alaskans 2020*]
 - d. Alaska Public Health System Assessment — Sept 2014 [*Healthy Alaskans 2020*]
 - e. Alaska Health Care Delivery & Financing Description — Sept 2014 [*DHSS*]

REPORT PROJECT TIMELINE

- June 30: Health Status Assessment Published by Healthy Alaskans 2020
- July 30: Finalize list of data elements to be included in report
- Sept 30: Health Care Delivery & Financing Report Published by DHSS
- Sept 30: Public Health System Assessment Published by Healthy Alaskans 2020
- October: ½-day discussion with invited “Alaskan Health Historians”; Recorded telephone interviews with select “Alaskan Health Historians” living outside Alaska
- Nov 3-21: Draft Report Circulated for Public Comment
- Dec 15: Finalize Report
- Jan 15: Public Release of Report
- Jan 27-29, 2015: **Alaska Health Summit:** Plenary Presentation by SHO Expert Advisory Panel

HIGHLIGHTS — IMPORTANT DEVELOPMENTS THAT SHOULD BE NOTED IN
COMMENTARY AND SUPPORTED IN DATA OVERVIEW
*LIMIT TO ISSUES THAT HAVE HAD A PROFOUND IMPACT ON HEALTH AND/OR HEALTH CARE
(PRELIMINARY “LAUNDRY LIST” FOR ADDING TO, THEN EVENTUAL PARING DOWN)*

HEALTH STATUS (OUTCOMES) SUCCESSES SINCE 1954

- Infant mortality
- TB
- Vaccine preventable diseases
- Occupational injury
- Tobacco use
- Life expectancy

OTHER HEALTH & HEALTH CARE ISSUES/DEVELOPMENTS SINCE 1954

- Public health law modernization
- Government investment in health care infrastructure development
- Government role as insurer (Medicare, Medicaid/CHIP, PPACA)
- History/evolution of the Alaska Tribal Health System
- New provider types, care models, financing models
 - CHA/Ps, BHAs, DHATs
 - Prematernal homes
 - Mid-Level Practitioner Scope of Practice
 - CAH, FESC, LTACH
- “330” Community Health Center System Development (from 1 in 1992 to 141 clinics today)
- Importance of Arctic Investigations/infectious disease research component – circumpolar health issues/perspective
- Novel infections/New Threats
 - HIV/AIDS
 - SARS/MERS
 - Bioterrorism
 - Antibiotic resistance
- “Diseases of Choice” — Chronic Disease prevalence
- Rural sanitation
- Creation of Alaska family practice residency program
- Union history in Alaska’s Health Care System
- Alaska Mental Health Trust Authority
- Development of Home & Community-Based Services — shift from institutional care
- Entry of outside health systems, e.g., Providence, Banner, PeaceHealth, etc.
- Use of Centers of Excellence
- Telemedicine
- Evolution of medical ethics

CONTINUING/FUTURE CHALLENGES

- Sustainability of medical service delivery infrastructure
- System supports for growing elder population
- Implications of specialty drugs, personalized medicine, genetics
- Health Information Infrastructure/Health Data Analytics

- Alcohol and Drug Abuse
- Mental health (including suicide; health care costs of depression; ACEs (Adverse Childhood Events)))
- Antibiotic resistance
- Emerging/novel infections
- Societal resistance/questions about vaccination
- Oral health

HISTORICAL CONTEXTUAL SHIFTS IN THE BROADER ECONOMY & ENVIRONMENT

- Alaska Pipeline
- Global climate change



C. Earl Albrecht and the Parran Alaska Health Survey Team, 1953

L to R: Dr. Antonio Ciocco, Dr. Thomas Parran, Dr. C. Earl Albrecht,
Dr. James Crabtree, Dr. Walter McNerey.

*Courtesy C. Earl Albrecht papers, Archives and Special Collections,
Consortium Library, University of Alaska Anchorage*